

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME CAMMACK BARRY LEE			2. SERVICE NUMBER AF 17575739			3. SOCIAL SECURITY NUMBER 488 46 5637		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE REGAF			5. GRADE, RATE OR RANK ALC		6. PAY GRADE E-3	7. DATE OF RANK 18 FEB 70	8. DATE OF BIRTH 24 SEP 43	9. DATE OF BIRTH 24 SEP 43
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			8. PLACE OF BIRTH (City and State or Country) KANSAS CITY MISSOURI			9. DATE OF BIRTH 24 SEP 43		
SELECTIVE SERVICE DATA	10. SELECTIVE SERVICE NUMBER UNKNOWN			11. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE UNKNOWN			12. DATE INDUCTED NA		
	13. TYPE OF TRANSFER OR DISCHARGE DISCHARGE			14. STATION OR INSTALLATION AT WHICH EFFECTED MCGUIRE AFB NJ					
TRANSFER OR DISCHARGE DATA	15. REASON AND AUTHORITY PAR 2-4B CH 2 SEC A AFM 39-12 (SDN 247) & LTR HQ 40TH TAC GP APO 09293 DATED 5MAR70*						16. EFFECTIVE DATE 8 MAR 70	17. DATE OF BIRTH 24 SEP 43	18. DATE OF BIRTH 24 SEP 43
	19. LAST DUTY ASSIGNMENT AND MAJOR COMMAND OL ISFD 40CSS (USAF)			20. CHARACTER OF SERVICE HONORABLE			21. TYPE OF CERTIFICATE ISSUED DD FORM 256 AF		
	22. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED NA						23. REENLISTMENT CODE RE-2		
	24. TERMINAL DATE OF RESERVE/UMTS OBLIGATION NA			25. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY <input type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input checked="" type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER			26. TERM OF SERVICE (Years) 4	27. DATE OF ENTRY 7 MAY 68	
SERVICE DATA	28. PRIOR REGULAR ENLISTMENTS TWO			29. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC E 5		30. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) AVIANO AB ITALY			
	31. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 2641 E 47TH STREET N KANSAS CITY (KANSAS CITY) MO 64123			32. STATEMENT OF SERVICE			YEARS	MONTHS	DAYS
	33. SPECIALTY NUMBER & TITLE AP SUPVR PAFSC 81170			34. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA			a. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	01 09 15
							(2) OTHER SERVICE	07 07 12	(3) TOTAL (Line (1) plus Line (2))
							b. TOTAL ACTIVE SERVICE	09 04 27	c. TOTAL SERVICE (Line (1) plus Line (2) plus Line (3))
							d. TOTAL SERVICE (Line (1) plus Line (2) plus Line (3))	01 11 07	e. TOTAL SERVICE (Line (1) plus Line (2) plus Line (3))
VA AND EMP. SERVICE DATA	35. NON-PAY PERIODS/TIME LOST (Preceding Two Years) 25 JAN 70-10 FEB 70			36. DAYS ACCRUED LEAVE PAID NOT PAID SEE ITEM #30		37. INSURANCE IN FORCE (NSLI or USGLD) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	38. AMOUNT OF ALLOTMENT NA		39. MONTH ALLOTMENT DISCONTINUED NA
				40. VA CLAIM NUMBER C- NA		41. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE			
	42. REMARKS HIGH SCHOOL GRADUATE BLOOD GROUP A POS ODS 7MAR70 NAC COMPL 19JAN61 FILED 4TH DIST OSI AQE DTD SEP60 M30 A65 G60 E35 EXCESS LEAVE 30 DAYS *SUBJECT: DISCHARGE								
AUTHENTICATION	43. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) 311 N WHEELING KANSAS CITY (KANSAS CITY) MO 64123				44. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Barry Cammack</i>				
	45. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER J J WYSOCKI 2ND LT USAF				46. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>J. J. Wysocki</i>				